

FEE TRANSMITTAL

Application Number 10/718,340

Art Unit 1654

Filing Date November 20, 2003

Confirmation No. 3646

Inventor(s) Rory Finn

Examiner Name Maury A. Audet

Attorney Docket Number 01449/1 (PHA 3300.1)



☐ Applicant claims small entity status.

METHOD OF PAYMENT

☒ The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

☐ Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. ☐ BASIC FILING, SEARCH AND EXAMINATION FEES
(Type: _____) Subtotal (1) \$ _____

2. ☐ EXCESS CLAIM FEES

Total Claims ____ - ____ (HP) = 0 x Fee ____ = \$0.00

Indep Claims ____ - ____ (HP) = 0 x Fee ____ = \$0.00

Multiple Dependent Claims Fee \$ _____

(HP = highest number of claims paid for)

Subtotal (2) \$0.00

3. ☐ APPLICATION SIZE FEE

Total Pages N/A - 100 = NaN ÷ 50 = 0 x \$ ____ = \$0.00

(Application + Drawings)

(round up to whole #)

Subtotal (3) \$0.00

4. ☒ OTHER FEE(S)

☒ three month extension of time

☐ Information disclosure statement

☐ 37 CFR 1.17(q) processing fee

☐ Non-English specification

☐ Notice of Appeal

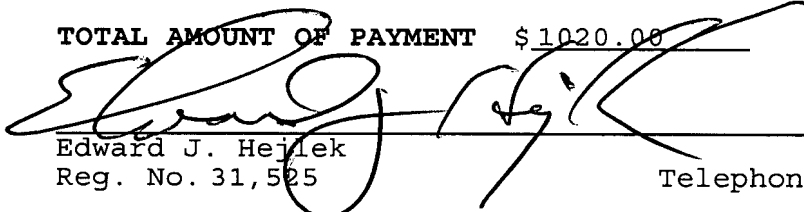
☐ Filing a brief in support of appeal

☐ Request for oral hearing

☐ Other: _____

Subtotal (4) \$1020.00

TOTAL AMOUNT OF PAYMENT \$1020.00


Edward J. Hejlek
Reg. No. 31,525

6/5/2007

Date

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EJH/dep

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